

# AUTO CR - LOG SUMMARY #1055424

TYPE: INFO

## Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
IT IS REPORTED THAT OFFICERS CURBED THE VEHICLE BECAUSE THE DRIVER WAS NOT WEARING A SEATBELT. THE SUBJECT WAS SEATED IN THE REAR OF THE VEHICLE WHEN THE OFFICERS OBSERVED 1 LARGE AND ONE SMALLER GAS TANK ALSO IN THE REAR OF THE VEHICLE AND OFFICER CLOHERTY OBSERVED SUSPECT NARCOTICS IN HIS LEFT HAND. THE SUBJECT WAS ORDERED OUT OF THE VEHICLE AT WHICH TIME HE PLACED THE ITEM IN THE FRONT OF HIS WAISTBAND. THE OFFICERS ATTEMPTED TO PLACE THE SUBJECT IN CUSTODY AT WHICH TIME HE PULLED AWAY AND WITH HIS RIGHT HAND RETRIEVED THE SUSPECT NARCOTICS AND THREW THEM TO THE GROUND. HE THEN STIFFENED AND PULLED AWAY FROM THE OFFICERS IN ORDER TO DEFEAT THE ARREST. THE SUBJECT WAS TASERED AND PLACED IN CUSTODY.	(None Entered)		

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	PENA, LUPE			025 /	CAPTAIN OF POLICE	M	S		

## Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
07-JUL-2012 09:58 - 07-JUL-2012 09:58		2522	025	304 - STREET	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Other Involved Parties

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Involved Member	CLOHERTY, JASON C	7468		025 /	POLICE OFFICER	M	WHI		
CPD Employee	Involved Member	USTASZEWSKI, BRIAN M	20116		025 /	POLICE OFFICER	M	WHI		
NON-CPD	Victim/Subject						M	WHI		

## Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

## Incident Category List

## Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y

## Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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## Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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## Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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## Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	29-OCT-2012 11:48	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	29-OCT-2012 11:48	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	17-JUL-2012 11:12	DEAN, BRUCE	SUPERVISING INV COPA	113 /	
PENDING SUPERVISOR REVIEW	17-JUL-2012 12:25	HEARD, LORRAINE	POLICE AIDE	716 / 113	
PRELIMINARY	10-JUL-2012 05:26	STEWART, DENISE	INTAKE AIDE	113 /	

## Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					STEWART, DENISE	10-JUL-2012 05:26			
	DOCUMENTS - INTAKE INCIDENT		2	OFC.B. USTASZEWSKI#9613	N	STEWART, DENISE	10-JUL-2012 08:33	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		3		N	STEWART, DENISE	10-JUL-2012 08:31	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	OFC. J. CLOHERTY#7468	N	STEWART, DENISE	10-JUL-2012 08:37	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1	SERIAL#	N	STEWART, DENISE	10-JUL-2012 05:29	DELETED		
	DOCUMENTS - INTAKE INCIDENT		6		N	STEWART, DENISE	10-JUL-2012 08:27	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1	SERIAL#	N	STEWART, DENISE	10-JUL-2012 08:47	APPROVED		

## Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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## Review Accused

Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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CHICAGO POLICE DEPARTMENT  
**ORIGINAL CASE INCIDENT REPORT**

3510 S. Michigan Avenue, Chicago, Illinois 60653  
(For use by Chicago Police Department Personnel Only)  
CPD-11.388(6/03)-C

RD # [REDACTED]  
Case ID: [REDACTED]  
EVENT # [REDACTED]

INCIDENT	<b>ASSIGNED TO ADMINISTRATIVE PERSONNEL</b>		
	IUCR: 2025 - Narcotics - Poss: Hallucinogens		
	Occurrence Location: [REDACTED] 277 - Parking Lot/Garage(Non.Resid.)	Beat: 2522	Unit Assigned: 2563E RO Arrival Date: 07 July 2012 21:57
	Occurrence Date: 07 July 2012 21:57	# Offenders: 2	

NON-OFFENDER(S)	<b>VICTIM - Society</b>		
	Name: STATE OF ILLINOIS, P.O. Ustaszewski		
	CPD Officer: No		

SUSPECT(S)	<b>Suspect # 1</b>		<b>In Custody</b>							
	Name: [REDACTED]	Beat: 3100	<b>Demographics</b>	DOB: [REDACTED]						
	Res: [REDACTED]		Male	Age: 17 years						
			White	Birth Place: Illinois						
			5'09,	State Id: [REDACTED]						
			230 lbs ,	<b>Suspected of Using:</b>						
			Blue Eyes	Drugs/Narcotics						
			Blond/Strawberry Hair							
			Medium Hair Style							
			Medium Complexion							
<b>Injury Info</b>										
CFD First Aid Given: Yes		Extent: Minor								
Responding Unit: Ambulance 7	Hospital: [REDACTED]									
	Physician Name: [REDACTED]									
<table><tr><td><u>Type</u></td><td><u>Weapon Used</u></td><td><u>Description</u></td></tr><tr><td>Other</td><td>Other</td><td>TASER</td></tr></table>					<u>Type</u>	<u>Weapon Used</u>	<u>Description</u>	Other	Other	TASER
<u>Type</u>	<u>Weapon Used</u>	<u>Description</u>								
Other	Other	TASER								
<b>Suspect # 2</b>		<b>In Custody</b>								
Name: [REDACTED]	Beat: 4100	<b>Demographics</b>	DOB: [REDACTED]							
Res: [REDACTED]		Male	Age: 27 years							
		White	Birth Place: Michigan							
		5'09,	DLN: [REDACTED]							
		160 lbs ,								
		Blue Eyes								
		Brown Hair								
		Natural Hair Style								
		Medium Complexion								

RD # [REDACTED]



SUSPECT(S)

VEHICLE

## Vehicle #1

Vehicle: 2008 Honda - Unknown - Automobile

Owner: [REDACTED]

Color- Blue/Blue

Style: Hardtop, 4-Door

Top/Bottom:

Stolen? No

Damaged? No

Destroyed? No

Burned? No

Theft From? No

Recovered? No

VIN #: [REDACTED]

Possessor/User: [REDACTED]

License Plate #: [REDACTED]

Expires: January-2013

Passenger Car

Towed? Yes

Reason: Unlawful Drugs

Auto Pound: 00701 N Sacramento

NARCOTICS

## Narcotics #1 - Seized

Possessor/User: [REDACTED]

Type: Ecstasy/Mdma

Location found: [REDACTED]

Taken/Stolen? No

Weight: 10 Hits/Pills

Packaging: Zip-Lock Plastic Bag(S)

Recovered? No

Owner: [REDACTED]

Seized? Yes

Inventory #: [REDACTED]

Quantity: 10

Container Containing Packages: Zip-Lock Bag

## Narcotics #2 - Seized

Possessor/User: [REDACTED]

Type: Ghb/Liquid

Location found: [REDACTED]

Taken/Stolen? No

Weight: 1200 Liquid Ounces

Packaging: Other

Recovered? No

Owner: [REDACTED]

Seized? Yes

Inventory #: [REDACTED]

Quantity: 2

Container Containing Packages: 1 Large And 1 Small Gas Tank

OTHER PROPERTIES

## Property #1

Possessor/User: Unknown

Quantity: 1

Used as Weapon? No

Inventory #: [REDACTED]

Taken/Stolen? No

Description: Taser Deployment Printout

Owner: P.O. Ustaszewski State  
Of Illinois

Recovered? Yes

Property Type: Other

## Property #2

Possessor/User: [REDACTED]

Quantity: 2

Used as Weapon? No

Inventory: [REDACTED]

Taken/Stolen? No

Description: 2 Bags Of Balloons

Owner: [REDACTED]

Recovered? Yes

Property Type: Other

Property #3	Possessor/User	[REDACTED]
<b>OTHER PROPERTIES</b>		
Description: 2 Balloons	Inventor: [REDACTED] Owner: [REDACTED] Property Type: Other	Used as Weapon? No Taken/Stolen? No Recovered? Yes
Property #4	Possessor/User: Unknown	
Description: Taser Cartridge And Prongs	Inventory #: [REDACTED] Owner: P.O. Ustaszewski State Of Illinois Property Type: Other	Used as Weapon? No Taken/Stolen? No Recovered? Yes

**NARRATIVES**

EVENT [REDACTED] IN SUMMARY A/O'S CURBED THE ABOVE VEHICLE FOR THE DRIVER NOT WEARING HIS SEAT BELT. THE OFFENDER WAS SEATED IN THE REAR OF THE VEHICLE. A/O'S APPROACHED AND OBSERVED 1 LARGE AND 1 SMALLER GAS TANKS IN THE REAR OF THE VEHICLE. P.O. CLOHERTY OBSERVED THAT THE OFFENDER HAD SUSPECT NARCOTICS IN HIS LEFT HAND. THE OFFENDER WAS ORDERED OUT OF THE VEHICLE AT WHICH TIME THE OFFENDER PLACED THE ITEM IN THE FRONT OF HIS WAIST BAND. A/O'S ATTEMPTED TO PLACED THE OFFENDER INTO CUSTODY AT WHICH TIME THE OFFENDER PULLED AWAY AND WITH HIS RIGHT HAND RETRIEVED THE SUSPECT NARCOTICS AND THREW THE ITEMS TO THE GROUND. THE OFFENDER STIFFENED AND PULLED AWAY FROM A/O'S IN ORDER TO DEFEAT THE ARREST. THE OFFENDER WAS TASERED AND PLACED INTO CUSTODY. P.O. CLOHERTY RECOVERED THE SUSPECT NARCOTICS AND FOUND IT TO BE 1 ZIP-LOCK BAG CONTAINING 1 ZIP-LOCK BAG WITH 9 PURPLE PILLS AND 1 GREEN PILL SUSPECT MDMA (INV# [REDACTED]). RECOVERED FROM THE OFFENDER WAS 2 BALLOONS (INV# [REDACTED]) RECOVERED FROM THE VEHICLE WAS 2 BAGS OF BALLOONS ([REDACTED]) AND 2 GAS TANKS CONTAINING NITROUS OXIDE (INV# [REDACTED]). NAME CHECK CLEAR. OFFENDER HAS \$1.00 U.S.C. THE OFFENDER STATED POST MIRANDA 08JUL2012/0200 AND NOT VERBATIM THAT THEY WENT TO [REDACTED] TO BUY IT BECAUSE THEY HAD A PARTY TO GO TO. THE DRIVER ([REDACTED]) WAS GIVEN A TICKET FOR NOT WEARING HIS SEAT BELT TICKET NUMBER [REDACTED] (OFFENDER) IN CUSTODY 720ILCS 5/24.5-10 MAN/DEL NITROUS OXIDE 720ILCS 570/402-C PCS MDMA 720ILCS5/31-1-A RESIST P.O. X2COURT INFO 50-4 24JUL12/1300  
FIRST ARRESTING OFFICER - STAR#: 9613 NAME: BRIAN USTASZEWSKI BEAT: 2563E  
SECOND ARRESTING OFFICER - STAR#: 7468 NAME: JASON CLOHERTY BEAT: 2563E  
SUPERVISOR ON SCENE - STAR#: 1145 NAME: ERIC OLSON BEAT: 2565

PERSONNEL							
	Star No	Emp No	Name	User	Date	Unit	Beat
Reporting Officer	7468	[REDACTED]	CLOHERTY, Jason, C	[REDACTED]	08 Jul 2012 02:48	025	2563E

IUCR ASSOCS.			
Victim	IUCR	Crime	Offender
STATE OF ILLINOIS	2025	Narcotics - Poss: Hallucinogens	[REDACTED]
STATE OF ILLINOIS	2025	Narcotics - Poss: Hallucinogens	[REDACTED]

## TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1. DATE OF INCIDENT <b>07-JUL-2012</b>		TIME <b>23:58:00</b>		2. ADDRESS OF OCCURRENCE [REDACTED]			3. LOCATION CODE <b>277</b>		4. BEAT/OCCUR <b>2522</b>												
	5. POSITION <b>9161</b>		6. LAST NAME <b>USTASZEWSKI</b>		7. FIRST NAME <b>BRIAN M</b>		8. STAR NO. <b>9613</b>		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE <b>WHI</b>		11. AGE [REDACTED]		12. HT. <b>600</b>		13. WT. <b>175</b>					
	14. DATE OF APPT. <b>10-OCT-2000</b>		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT <b>025 2563E</b>		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No											
SUBJECT INFORMATION	20. LAST NAME [REDACTED]		21. FIRST NAME [REDACTED]		22. M.I. <b>A</b>		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE <b>WHI</b>		25. D.O.B. [REDACTED]		26. HT. <b>509</b>		27. WT. <b>230</b>							
	28. ADDRESS [REDACTED]		29. TELEPHONE NO. [REDACTED]		30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No													
	33. WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]		34. BY WHOM? [REDACTED]		35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input checked="" type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid		36. CHARGES PLACED <b>720 ILCS 5.0/31-1-A, 720 ILCS 5.0/31-1-A, 720 ILCS 570.0/402-C, 720 ILCS 5.0/24.5-</b>		37. CB NO. [REDACTED]		IR NO. [REDACTED]											
REASON FOR USE OF FORCE (Check all that apply)	38. DNA <input type="checkbox"/>		SUBJECT'S ACTIONS		MEMBER'S RESPONSE		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE							
			DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> OTHER _____		MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input checked="" type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		FLED <input type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____					
WEAPON DISCHARGE INCIDENT	39. DNA <input type="checkbox"/>		40. ADDITIONAL INFORMATION		41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input checked="" type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial		44. WEATHER CONDITIONS <b>CLEAR</b>		45. MAKE/MANUFACTURER		46. MODEL		47. BARREL LENGTH		48. CALIBER/GAUGE			
	49. TASER DART ID NO. <b>C3101WTPPT</b>		50. WEAPON SERIAL No. (Include Letters) <b>X00-554197</b>		51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO.		53. HANDGUN CERTIFICATE NO.		54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER <b>1</b>		58. TOTAL NO. OF SHOTS MEMBER FIRED			
	59. WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)		63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)	
CASE INFO.	70. EVENT NO.		71. R.D. NO.		72. NOTIFICATIONS (OC OR TASER INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.		73. REPORTING MEMBER (Print Name) <b>USTASZEWSKI, BRIAN M</b> <b>08-JUL-2012 00:58:59</b>		STAR/EMPLOYEE NO. <b>9613</b>		SIGNATURE [REDACTED]		74. REVIEWING SUPERVISOR (Print Name) <b>OLSON, ERIC R</b>		STAR NO. <b>1145</b>		SIGNATURE [REDACTED]		DATE REVIEWED <b>08-JUL-2012 01:02:43</b>		TIME	

## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING; 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

**\*\*OFFICER USED INCORRECT TIME\*\*** Correct time is 2158 hours, on 07-Jul-12. IPRA contacted on 10-Jul-12, Stewart #34883. CL obtained for taser discharge per Department policy. Subject no longer in CPD custody.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The Officer's actions were in compliance with Department procedures and directives.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1055424 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

**PENA, LUPE**

SIGNATURE

DATE COMPLETED

TIME

**10-JUL-2012 17:33:58**

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ SUPPLEMENTARY REPORT

☐ I.O.D. REPORT

80. TOTAL TRR's THIS EVENT No.

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

**2**

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)



## TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1. DATE OF INCIDENT <b>07-JUL-2012</b>		TIME <b>21:58:00</b>		2. ADDRESS OF OCCURRENCE [REDACTED]			3. LOCATION CODE <b>277</b>		4. BEAT/OCCUR <b>2522</b>								
	5. POSITION <b>9161</b>		6. LAST NAME <b>CLOHERTY</b>		7. FIRST NAME <b>JASON C</b>		8. STAR NO. <b>7468</b>		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE <b>WHI</b>		11. AGE [REDACTED]		12. HT. <b>511</b>		13. WT. <b>215</b>	
	14. DATE OF APPT. <b>25-AUG-2003</b>		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT <b>025 2563E</b>		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No							
SUBJECT INFORMATION	20. LAST NAME [REDACTED]		21. FIRST NAME [REDACTED]		22. M.I. <b>A</b>		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE <b>WHI</b>		25. D.O.B. [REDACTED]		26. HT. <b>509</b>		27. WT. <b>230</b>			
	28. ADDRESS [REDACTED]		29. TELEPHONE NO. [REDACTED]		30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No									
	33. WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]		34. BY WHOM? [REDACTED]		35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input checked="" type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid		36. CHARGES PLACED <b>720 ILCS 5.0/31-1-A, 720 ILCS 5.0/31-1-A, 720 ILCS 570.0/402-C, 720 ILCS 5.0/24.5-</b>		37. CB NO. [REDACTED]		IR NO. [REDACTED]							
REASON FOR USE OF FORCE (Check all that apply)	38. <input type="checkbox"/> DNA		SUBJECT'S ACTIONS		MEMBER'S RESPONSE													
			PASSIVE RESISTER DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> OTHER _____		ACTIVE RESISTER FLED <input type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER _____		ASSAILANT: ASSAULT IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		ASSAILANT: BATTERY ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		ASSAILANT: DEADLY FORCE USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____							
WEAPON DISCHARGE INCIDENT	39. <input checked="" type="checkbox"/> DNA		MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input checked="" type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input checked="" type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input checked="" type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		FIREARM <input type="checkbox"/> OTHER _____							
	40. ADDITIONAL INFORMATION																	
	41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial		44. WEATHER CONDITIONS <b>CLEAR</b>											
45. MAKE/MANUFACTURER		46. MODEL		47. BARREL LENGTH		48. CALIBER/GAUGE												
49. TASER DART ID NO.		50. WEAPON SERIAL NO. (Include Letters)		51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO.		53. HANDGUN CERTIFICATE NO.										
54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER		58. TOTAL NO. OF SHOTS MEMBER FIRED										
59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)		63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO						
66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)												
CASE INFO.	70. EVENT NO.		71. R.D. NO.															
	72. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.																	
SIGNATURES	73. REPORTING MEMBER (Print Name) <b>CLOHERTY, JASON C</b>		STAR/EMPLOYEE NO. <b>7468</b>		SIGNATURE [REDACTED]													
	74. REVIEWING SUPERVISOR (Print Name) <b>OLSON, ERIC R</b>		STAR NO. <b>1145</b>		SIGNATURE [REDACTED]		DATE REVIEWED <b>08-JUL-2012 01:03:06</b>		TIME <b>08-JUL-2012 01:03:06</b>									

## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING; 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ UNABLE TO INTERVIEW (Specify Reason)

Incident occurred on 07-Jul-12, 2158 hours. IPRA contacted on 10-Jul-12, Stewart #34883. CL obtained for taser discharge by another officer at scene, per Department policy. Subject no longer in CPD custody

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The officer's actions were in compliance with Department procedures and directives.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1055424 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

**PENA, LUPE**

SIGNATURE

[REDACTED]

DATE COMPLETED

TIME

**10-JUL-2012 17:36:35**

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ SUPPLEMENTARY REPORT

☐ I.O.D. REPORT

80. TOTAL TRR's THIS EVENT No.

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

**2**

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)




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 PROTECT LIFE
 

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**TASER Information**

**Serial #** *X00-554197*  
**Model #** *X26*  
**X26 Software Version** *22*  
**Dataport CD Version** *17.9*  
**Record Date Range** *07/07/2012 - 07/10/2012*  
**Computer Time Zone** *Central Standard Time*  
*\*DST*  
**Using Daylight Savings Time** *Yes*

**Downloaded By**

**Name** *LUPE PENA*  
**Dept** *cpd*  
**Rank** *CAPT*  
**Windows Version** *Windows XP*  
**Report Generated** *07/10/12 16:27:01 (local)*

**Recorded Firing Data**

Seq	GMT Time	Local Time	Duration	Temp	Battery
0012	07/08/12 02:58:44	07/07/12 21:58:44	5	29	67

**Recorded X26 Time Changes**

Seq	GMT Time	Local Time	Change Type
0001	Incomplete Time Change Record		
0002	10/26/10 14:08:32	10/26/10 09:08:32	FROM
0003	10/26/10 14:08:32	10/26/10 09:08:32	TO
0004	01/01/00 03:51:11	12/31/99 21:51:11	FROM
0005	05/15/11 02:07:28	05/14/11 21:07:28	TO
0006	02/24/12 08:31:17	02/24/12 02:31:17	FROM
0007	02/24/12 08:23:41	02/24/12 02:23:41	TO
0008	05/29/12 08:58:03	05/29/12 03:58:03	FROM
0009	05/29/12 08:56:53	05/29/12 03:56:53	TO
0010	01/11/00 19:39:00	01/11/00 13:39:00	FROM
0011	06/10/12 15:57:23	06/10/12 10:57:23	TO

End of Report.

about:blank

7/10/2012

# AUTO CR - LOG SUMMARY #1055424

TYPE: INFO

## Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
IT IS REPORTED THAT OFFICERS CURBED THE VEHICLE BECAUSE THE DRIVER WAS NOT WEARING A SEATBELT. THE SUBJECT WAS SEATED IN THE REAR OF THE VEHICLE WHEN THE OFFICERS OBSERVED 1 LARGE AND ONE SMALLER GAS TANK ALSO IN THE REAR OF THE VEHICLE AND OFFICER CLOHERTY OBSERVED SUSPECT NARCOTICS IN HIS LEFT HAND. THE SUBJECT WAS ORDERED OUT OF THE VEHICLE AT WHICH TIME HE PLACED THE ITEM IN THE FRONT OF HIS WAISTBAND. THE OFFICERS ATTEMPTED TO PLACE THE SUBJECT IN CUSTODY AT WHICH TIME HE PULLED AWAY AND WITH HIS RIGHT HAND RETRIEVED THE SUSPECT NARCOTICS AND THREW THEM TO THE GROUND. HE THEN STIFFENED AND PULLED AWAY FROM THE OFFICERS IN ORDER TO DEFEAT THE ARREST. THE SUBJECT WAS TASERED AND PLACED IN CUSTODY.	(None Entered)		

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	PENA, LUPE			025 /	CAPTAIN OF POLICE	M	S		

## Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
07-JUL-2012 09:58 - 07-JUL-2012 09:58		2522	025	304 - STREET	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Other Involved Parties

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Involved Member	CLOHERTY, JASON C	7468		025 /	POLICE OFFICER	M	WHI		
CPD Employee	Involved Member	USTASZEWSKI, BRIAN M	20116		025 /	POLICE OFFICER	M	WHI		
NON-CPD	Victim/Subject						M	WHI		

## Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

## Incident Category List

## Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y

## Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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## Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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## Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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## Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	29-OCT-2012 11:48	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	29-OCT-2012 11:48	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	17-JUL-2012 11:12	DEAN, BRUCE	SUPERVISING INV COPA	113 /	
PENDING SUPERVISOR REVIEW	17-JUL-2012 12:25	HEARD, LORRAINE	POLICE AIDE	716 / 113	
PRELIMINARY	10-JUL-2012 05:26	STEWART, DENISE	INTAKE AIDE	113 /	

## Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					STEWART, DENISE	10-JUL-2012 05:26			
	DOCUMENTS - INTAKE INCIDENT		2	OFC.B. USTASZEWSKI#9613	N	STEWART, DENISE	10-JUL-2012 08:33	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		3		N	STEWART, DENISE	10-JUL-2012 08:31	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	OFC. J. CLOHERTY#7468	N	STEWART, DENISE	10-JUL-2012 08:37	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1	SERIAL#	N	STEWART, DENISE	10-JUL-2012 05:29	DELETED		
	DOCUMENTS - INTAKE INCIDENT		6		N	STEWART, DENISE	10-JUL-2012 08:27	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1	SERIAL#	N	STEWART, DENISE	10-JUL-2012 08:47	APPROVED		

## Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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## Review Accused

Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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# FACE SHEET (Notification Date: 10-JUL-2012) - LOG #1055424

TYPE: INFO

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party				025 /	CAPTAIN OF POLICE	M	S		

## Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
07-JUL-2012 09:58 - 07-JUL-2012 09:58		2522	025	304 - STREET	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

## Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y

## Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	10-JUL-2012 17:26	STEWART, DENISE	

## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	29-OCT-2012 11:48	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	29-OCT-2012 11:48	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	17-JUL-2012 11:12	DEAN, BRUCE	SUPERVISING INV COPA	113 /	
PENDING SUPERVISOR REVIEW	17-JUL-2012 12:25	HEARD, LORRAINE	POLICE AIDE	716 / 113	
PRELIMINARY	10-JUL-2012 05:26	STEWART, DENISE	INTAKE AIDE	113 /	



**TASER Information**

**Serial #** X00-570709  
**Model #** X26  
**X26 Software Version** 22  
**Dataport CD Version** 17.9  
**Record Date Range** 07/10/2012 - 07/10/2012  
**Computer Time Zone** Central Standard Time \*DST  
**Using Daylight Savings Time** Yes

**Downloaded By**

**Name** Michael Poppish  
**Dept** CPD District 008  
**Rank** Sgt  
**Windows Version** Windows XP  
**Report Generated** 07/10/12 16:46:59 (local)

**Recorded Firing Data**

Seq	GMT Time	Local Time	Duration	Temp	Battery
0001	07/10/12 15:19:08	07/10/12 10:19:08	1	26	40
0002	07/10/12 20:13:59	07/10/12 15:13:59	5	27	40

**Recorded X26 Time Changes**

Seq	GMT Time	Local Time	Change Type
0003	08/24/11 16:39:19	08/24/11 11:39:19	FROM
0004	08/24/11 16:29:18	08/24/11 11:29:18	TO
0005	10/19/11 15:28:37	10/19/11 10:28:37	FROM
0006	10/19/11 03:23:40	10/18/11 22:23:40	TO
0007	10/19/11 03:49:08	10/18/11 22:49:08	FROM
0008	10/19/11 15:55:06	10/19/11 10:55:06	TO

End of Report.